CLAIMS ONLY

SERIAL NO. FILING DATE

APPLICANT(S)

CLAIMS

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79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100 TOTAL IND. TOTAL DEP.	77					 	
80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100 TOTAL IND. TOTAL DEP.	78						
81 82 83 84 85 86 87 88 89 90 91 91 92 93 94 95 96 97 98 99 100 TOTAL IND. TOTAL DEP.	79						
82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100 TOTAL IND.	80	1					
83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100 TOTAL IND. TOTAL DEP.	81						<u> </u>
84 85 86 87 88 89 90 91 91 92 93 94 95 96 97 98 99 100 TOTAL IND. TOTAL DEP.	82	1				 	
85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100 TOTAL IND. TOTAL DEP.	83	1					
86 87 88 89 90 90 91 92 93 94 95 96 97 98 99 100 TOTAL IND. TOTAL DEP.	84	†	†	†	†		
87 88 89 90 91 91 92 93 94 95 96 97 98 99 100 TOTAL IND. TOTAL DEP.	85		1	1			
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* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

FORM PTO-2022 (1-98)

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